

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF NEW JERSEY

Case number (if known)

Chapter you are filing under:

☐ Chapter 7

☒ Chapter 11

☐ Chapter 12

☐ Chapter 13

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Robert

First name

H.

Middle name

Bring your picture identification to your meeting with the trustee.

Sickles

Last name and Suffix (Sr., Jr., II, III)

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names and any assumed, trade names and *doing business as* names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-6174

Debtor 1 Robert H. Sickles

Case number (if known) _____

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Your Employer Identification Number (EIN), if any.

EIN

EIN

5. Where you live

4 Heathcliff Road
Rumson, NJ 07760

Number, Street, City, State & ZIP Code

Monmouth

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

- ☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

- ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Robert H. Sickles

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.
- ☐ Chapter 7
- ☒ Chapter 11
- ☐ Chapter 12
- ☐ Chapter 13
-
8. **How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
-
9. **Have you filed for bankruptcy within the last 8 years?** ☒ No.
- ☐ Yes.
- | | | | | | |
|----------|-------|------|-------|-------------|-------|
| District | _____ | When | _____ | Case number | _____ |
| District | _____ | When | _____ | Case number | _____ |
| District | _____ | When | _____ | Case number | _____ |
-
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☐ No
- ☒ Yes.
- | | | | |
|----------|-----------------------------|-----------------------|--------------------------|
| Debtor | <u>AHS Realty LLC</u> | Relationship to you | <u>Business</u> |
| District | <u>New Jersey - Trenton</u> | When | <u>5/09/24</u> |
| | | Case number, if known | <u>24-14779</u> |
| Debtor | <u>TST Beverages LLC</u> | Relationship to you | <u>Debtor's business</u> |
| District | <u>New Jersey-Trenton</u> | When | <u>4/23/24</u> |
| | | Case number, if known | <u>24-14130</u> |
-
11. **Do you rent your residence?** ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 Robert H. Sickles

Case number (if known)

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?**☐ No. Go to Part 4.☒ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

See Attachment

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☐ No. I am not filing under Chapter 11.☒ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.☐ Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**☒ No.☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Robert H. Sickles

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Robert H. Sickles

Case number (if known)

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> No. Go to line 16b. <input type="checkbox"/> Yes. Go to line 17.		
	16b. Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <input type="checkbox"/> No. Go to line 16c. <input checked="" type="checkbox"/> Yes. Go to line 17.		
	16c. State the type of debts you owe that are not consumer debts or business debts _____		
<hr/>			
17. Are you filing under Chapter 7?	<input checked="" type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18.		
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<input type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input type="checkbox"/> No <input type="checkbox"/> Yes		
<hr/>			
18. How many Creditors do you estimate that you owe?	<input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
<hr/>			
19. How much do you estimate your assets to be worth?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input checked="" type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
<hr/>			
20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion

Part 7: Sign Below**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Robert H. Sickles

Robert H. Sickles

Signature of Debtor 1

Signature of Debtor 2

Executed on May 9, 2024
MM / DD / YYYYExecuted on _____
MM / DD / YYYY

Debtor 1 Robert H. Sickles

Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel M. Stolz

Signature of Attorney for Debtor

Date

May 9, 2024

MM / DD / YYYY

Daniel M. Stolz

Printed name

GENOVA BURNS LLC

Firm name

110 Allen Road

Suite 304

Basking Ridge, NJ 07920

Number, Street, City, State & ZIP Code

Contact phone (973) 467-2700

Email address

dstolz@genovaburns.com

028461980 NJ

Bar number & State

Debtor 1 Robert H. Sickles

Case number (if known) _____

Fill in this information to identify your case:

Debtor 1 Robert H. Sickles
First Name Middle Name Last Name

Debtor 2
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number
(if known) _____

☐ Check if this is an amended filing

FORM 101. VOLUNTARY PETITION ATTACHMENT

Additional Sole Proprietorship(s)

Sickles Market LLC
Name of business, if any

1 Harrison Ave
Little Silver, NJ 07739
Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☒ None of the above

Sickles Market Provisions LLC
Name of business, if any

200 Monmouth St.
Suite 100
Red Bank, NJ 07701
Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☒ None of the above

Debtor 1 Robert H. Sickles

Case number *(if known)* _____

TST Beverages LLC

Name of business, if any

200 Monmouth Street
Suite 175
Red Bank, NJ 07701

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☒ None of the above

Certificate Number: 03621-NJ-CC-038411877



03621-NJ-CC-038411877

CERTIFICATE OF COUNSELING

I CERTIFY that on April 24, 2024, at 3:16 o'clock PM EDT, Robert Sickles received from Credit Card Management Services, Inc. d/b/a Debthelper.com, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the District of New Jersey, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: April 24, 2024 By: /s/Lashonda Collins

Name: Lashonda Collins

Title: Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

Fill in this information to identify your case:

Debtor 1 Robert H. Sickles
First Name Middle Name Last Name

Debtor 2
 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number _____
 (if known)

☐ Check if this is an amended filing

B 104

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

12/15

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

		Unsecured claim	
1	State of New Jersey Sales & Use Tax CN 999 Trenton, NJ 08625-0999 _____ Contact _____ Contact phone _____	What is the nature of the claim? Business Sales & Use Tax As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) Value of security: _____ Unsecured claim _____	\$766,784.00
2	Core Funding Source LLC 8549 Wilshire Blvd Suite 852 Beverly Hills, CA 90211 _____ _____	What is the nature of the claim? Personal Guaranty on Business Debt As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No	\$159,893.00

Debtor 1	Robert H. Sickles	Case number (if known)	
Contact		<input type="checkbox"/> Yes. Total claim (secured and unsecured)	
Contact phone		Value of security:	-
		Unsecured claim	

3	Eminent Funding LLC 369 Lexington Avenue 2nd and 3rd Floors New York, NY 10017	What is the nature of the claim? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply	Personal Guaranty on Business Debt \$134,991.00
		Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured)	- Value of security: Unsecured claim
	Contact		
	Contact phone		

4	Avion Funding/Reliance Financial 633 167th Street N. Miami Beach, FL 33162	What is the nature of the claim? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply	Personal Guaranty on Business Debt \$134,900.00
		Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured)	- Value of security: Unsecured claim
	Contact		
	Contact phone		

5	US Foods, Inc. 9399 West Higgins Road Suite 600 Rosemont, IL 60018	What is the nature of the claim? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply	Personal Guaranty on Business Debt \$116,302.86
		Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured)	- Value of security: Unsecured claim
	Contact		
	Contact phone		

6		What is the nature of the claim?	Personal Guaranty on Business Debt \$109,010.00
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Debtor 1 <u>Robert H. Sickles</u>		Case number (if known) _____	
 Kapitus LLC/Kapitus Servicing, Inc. 2500 Wilson Blvd., Suite 350 Arlington, VA 22201 _____ _____ Contact _____ Contact phone		As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) _____ Value of security: - _____ Unsecured claim _____	
 7 Wellen Capital LLC 872 S. Milwaukee Ave., #289 Libertyville, IL 60048 _____ _____ Contact _____ Contact phone		What is the nature of the claim?	Personal Guaranty on Business Debt <u>\$106,175.00</u>
		As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) _____ Value of security: - _____ Unsecured claim _____	
 8 Performance Food Group, Inc. d/b/a Performance Foodservice Metro NY 1 Center Drive CN-6070 Elizabeth, NJ 07207 _____ _____ Contact _____ Contact phone		What is the nature of the claim?	Personal Guaranty on Business Debt <u>\$100,489.75</u>
		As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Total claim (secured and unsecured) _____ Value of security: - _____ Unsecured claim _____	
 9 Union Funding Group LLC 1835 E. Hallandale Beach Blvd, #278 Hallandale, FL 33009 _____		What is the nature of the claim?	Personal Guaranty on Business Debt <u>\$72,515.00</u>
		As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply	

Debtor 1	Robert H. Sickles		Case number (if known)
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<div style="border-bottom: 1px solid black; padding-bottom: 5px;">Contact</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Contact phone</div>	<p>Does the creditor have a lien on your property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Total claim (secured and unsecured) _____</p> <p style="margin-left: 40px;">Value of security: - _____</p> <p style="margin-left: 40px;">Unsecured claim _____</p>
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10	<div style="border-bottom: 1px solid black; padding-bottom: 5px;">Zinch Funding</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">17011 Beach Blvd., Suite 1140</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Huntington Beach, CA 92647</div>		<p>What is the nature of the claim?</p> <p style="text-align: right;">Personal Guaranty on Business Debt</p> <p style="text-align: right; border-bottom: 1px solid black;">\$57,621.00</p>
	<div style="border-bottom: 1px solid black; padding-bottom: 5px;">Contact</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Contact phone</div>		<p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p><input type="checkbox"/> None of the above apply</p> <p>Does the creditor have a lien on your property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Total claim (secured and unsecured) _____</p> <p style="margin-left: 40px;">Value of security: - _____</p> <p style="margin-left: 40px;">Unsecured claim _____</p>

11	<div style="border-bottom: 1px solid black; padding-bottom: 5px;">Credit Line Capital Group</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">124 Grove Avenue</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Suite 194</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Cedarhurst, NY 11516</div>		<p>What is the nature of the claim?</p> <p style="text-align: right;">Personal Guaranty on Business Debt</p> <p style="text-align: right; border-bottom: 1px solid black;">\$55,453.00</p>
	<div style="border-bottom: 1px solid black; padding-bottom: 5px;">Contact</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Contact phone</div>		<p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p><input type="checkbox"/> None of the above apply</p> <p>Does the creditor have a lien on your property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Total claim (secured and unsecured) _____</p> <p style="margin-left: 40px;">Value of security: - _____</p> <p style="margin-left: 40px;">Unsecured claim _____</p>

12	<div style="border-bottom: 1px solid black; padding-bottom: 5px;">Meged Funding Group Corp.</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">1 Princeton Ave.</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Brick, NJ 08724</div>		<p>What is the nature of the claim?</p> <p style="text-align: right;">Personal Guaranty on Business Debt</p> <p style="text-align: right; border-bottom: 1px solid black;">\$51,806.25</p>
	<div style="border-bottom: 1px solid black; padding-bottom: 5px;">Contact</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Contact phone</div>		<p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p><input type="checkbox"/> None of the above apply</p> <p>Does the creditor have a lien on your property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Total claim (secured and unsecured) _____</p> <p style="margin-left: 40px;">Value of security: - _____</p> <p style="margin-left: 40px;">Unsecured claim _____</p>

Case number (if known)

Contact phoneContact phoneContact phone

Gourmet Foods International
38 Fairfield Place
West Caldwell, NJ 07006

Debtor 1 Robert H. Sickles Case number (if known) _____

Contact _____

Contact phone _____

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) _____
Value of security: - _____
Unsecured claim _____

17

American Express
200 Vesey Street
Manhattan, NY 10001

Contact _____

Contact phone _____

What is the nature of the claim? Credit card purchases \$17,859.04

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) _____
Value of security: - _____
Unsecured claim _____

18

S. Katzman Produce
153-57 Row A
Hunts Point Produce Market
Bronx, NY 10474

Contact _____

Contact phone _____

What is the nature of the claim? Personal Guaranty on Business Debt \$13,238.50

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☒ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) _____
Value of security: - _____
Unsecured claim _____

19

BFG Supply Co LLC
14500 Kinsman Road
Burton, OH 44021

Contact _____

Contact phone _____

What is the nature of the claim? Personal Guaranty on Business Debt \$8,857.10

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☒ Unliquidated
☒ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured) _____
Value of security: - _____
Unsecured claim _____

Debtor 1 Robert H. Sickles Case number (if known) _____

20	What is the nature of the claim?	Personal Guaranty on	\$8,704.76
		Business Debt	
Food Merchants LLC			
6823 Fort Hamilton Pkwy			
Suite 123			
Brooklyn, NY 11219			
<hr/>			
As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Contingent			
<input checked="" type="checkbox"/> Unliquidated			
<input checked="" type="checkbox"/> Disputed			
<input type="checkbox"/> None of the above apply			
<hr/>			
Does the creditor have a lien on your property?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes. Total claim (secured and unsecured) _____			
Value of security: - _____			
Unsecured claim _____			
<hr/>			

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

X <u>/s/ Robert H. Sickles</u>	X _____
Robert H. Sickles	Signature of Debtor 2
Signature of Debtor 1	
<hr/>	
Date <u>May 9, 2024</u>	Date _____

Fill in this information to identify your case:

Debtor 1	Robert H. Sickles		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new **Summary** and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 900,000.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 10,052,662.55
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 10,952,662.55

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 5,452,780.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 766,784.00
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 1,289,402.40
Your total liabilities		\$ 7,508,966.40

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 3,837.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 8,455.66

Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**
- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes
7. **What kind of debt do you have?**
- ☐ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☒ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

Debtor 1 Robert H. Sickles

Case number (if known) _____

8. **From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ _____

9. **Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

	Total claim
From Part 4 on <i>Schedule E/F</i>, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$ _____
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ _____
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ _____
9d. Student loans. (Copy line 6f.)	\$ _____
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ _____
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ _____
9g. Total. Add lines 9a through 9f.	\$ _____

Fill in this information to identify your case and this filing:

Debtor 1	Robert H. Sickles		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY			
Case number			

☐ Check if this is an amended filing

Official Form 106A/B Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1

5 Harrison Ave

Street address, if available, or other description

Little Silver NJ 07739-0000

City State ZIP Code

Monmouth

County

What is the property? Check all that apply

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other

Who has an interest in the property? Check one

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

Unknown

Unknown

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Ownership Interest

☐ Check if this is community property (see instructions)

Debtor 1 Robert H. Sickles

Case number (if known) _____

If you own or have more than one, list here:

1.2

4 Healthcliff Road

Street address, if available, or other description

Rumson NJ 07760-0000

City State ZIP Code

Monmouth

County

What is the property? Check all that apply

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$1,800,000.00

Current value of the portion you own?

\$900,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

Tenants by the Entirety

☐ **Check if this is community property** (see instructions)

2. **Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>**

\$900,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. **Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

☐ No

☒ Yes

3.1 Make: Jeep
 Model: Cherokee
 Year: 2017
 Approximate mileage: 39,174
 Other information:

Who has an interest in the property? Check one

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$10,000.00

Current value of the portion you own?

\$0.00

3.2 Make: Honda
 Model: Fit
 Year: 2015
 Approximate mileage: 51,687
 Other information:

Who has an interest in the property? Check one

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$7,000.00

Current value of the portion you own?

\$0.00

Debtor 1 Robert H. Sickles

Case number (if known) _____

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

☒ No

☐ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$0.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe.....

ordinary household furniture, fixtures, appliances

\$8,875.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe.....

TVs, speaker, lpad, phone

\$2,500.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No

☒ Yes. Describe.....

wine collection

\$2,500.00

1 antique piece of furniture

\$900.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No

☒ Yes. Describe.....

treadmill

\$500.00

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

Debtor 1 Robert H. Sickles Case number (if known) _____

ordinary clothing \$2,000.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

- ☒ No
☐ Yes. Describe.....

13. Non-farm animals

Examples: Dogs, cats, birds, horses

- ☐ No
☒ Yes. Describe.....

Pet dog \$0.00

14. Any other personal and household items you did not already list, including any health aids you did not list

- ☒ No
☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$17,275.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- ☒ No
☐ Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

- ☐ No
☒ Yes..... Institution name:

17.1. Checking Wells Fargo Bank (2478) \$171.00

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

- ☒ No
☐ Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

- ☒ No
☐ Yes. Give specific information about them.....
 Name of entity: % of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

- ☒ No
☐ Yes. Give specific information about them
 Issuer name:

Debtor 1 Robert H. Sickles

Case number (if known) _____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No

☒ Yes. List each account separately.

Type of account:

Institution name:

401(k)

Vanguard Dividend Growth Fund

\$10,216.55

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes.....

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☒ No

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☐ No

☒ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

refund due for joint filing

tax

\$25,000.00

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information..

Debtor 1 Robert H. Sickles

Case number (if known) _____

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund
value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No

☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No

☐ Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☒ No

☐ Yes. Describe each claim.....

35. Any financial assets you did not already list

☒ No

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$35,387.55

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

☐ No. Go to Part 6.

☒ Yes. Go to line 38.

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

38. Accounts receivable or commissions you already earned

☒ No

☐ Yes. Describe.....

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☒ No

☐ Yes. Describe.....

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

☒ No

☐ Yes. Describe.....

41. Inventory

☒ No

☐ Yes. Describe.....

42. Interests in partnerships or joint ventures

☐ No

Debtor 1 Robert H. Sickles Case number (if known) _____

☒ Yes. Give specific information about them.....

Name of entity:

% of ownership:

Debtor is sole owner of AHS Realty LLC, which owns the real property located at 1 Harrison Ave., Little Silver, NJ

100% %

\$10,000,000.00

43. Customer lists, mailing lists, or other compilations

☒ No.

☐ Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

☒ No

☐ Yes. Describe.....

44. Any business-related property you did not already list

☒ No

☐ Yes. Give specific information.....

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....

\$10,000,000.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☒ No. Go to Part 7.

☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No

☐ Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2		\$900,000.00
56. Part 2: Total vehicles, line 5	\$0.00	
57. Part 3: Total personal and household items, line 15	\$17,275.00	
58. Part 4: Total financial assets, line 36	\$35,387.55	
59. Part 5: Total business-related property, line 45	\$10,000,000.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	+ \$0.00	
62. Total personal property. Add lines 56 through 61...	\$10,052,662.55	Copy personal property total \$10,052,662.55
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$10,952,662.55

Fill in this information to identify your case:

Debtor 1	Robert H. Sickles		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number (if known)			

☐ Check if this is an amended filing
Official Form 106C**Schedule C: The Property You Claim as Exempt**

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. **Which set of exemptions are you claiming?** Check one only, even if your spouse is filing with you.

☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. **For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
4 Healthcliff Road Rumson, NJ 07760 Monmouth County Line from <i>Schedule A/B</i> : 1.2	\$900,000.00	<input checked="" type="checkbox"/> \$27,900.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)
ordinary household furniture, fixtures, appliances Line from <i>Schedule A/B</i> : 6.1	\$8,875.00	<input checked="" type="checkbox"/> \$8,875.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
TVs, speaker, Ipad, phone Line from <i>Schedule A/B</i> : 7.1	\$2,500.00	<input checked="" type="checkbox"/> \$2,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
wine collection Line from <i>Schedule A/B</i> : 8.1	\$2,500.00	<input checked="" type="checkbox"/> \$2,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
1 antique piece of furniture Line from <i>Schedule A/B</i> : 8.2	\$900.00	<input checked="" type="checkbox"/> \$900.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)

Debtor 1 Robert H. Sickles

Case number (if known)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
treadmill Line from Schedule A/B: 9.1	\$500.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
ordinary clothing Line from Schedule A/B: 11.1	\$2,000.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Checking: Wells Fargo Bank (2478) Line from Schedule A/B: 17.1	\$171.00	<input checked="" type="checkbox"/> \$171.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
401(k): Vanguard Dividend Growth Fund Line from Schedule A/B: 21.1	\$10,216.55	<input checked="" type="checkbox"/> \$10,216.55 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(10)(E)

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

☒ No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

☐ Yes

Fill in this information to identify your case:

Debtor 1	Robert H. Sickles		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any	
2.1	Bluestone Commercial Capital LLC <small>Creditor's Name</small> 41 Grove Street Haddonfield, NJ 08033 <small>Number, Street, City, State & Zip Code</small>	Describe the property that secures the claim: 5 Harrison Ave Little Silver, NJ 07739 Monmouth County As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>First position mortgage lien and security interest</u>	\$532,000.00	Unknown	Unknown
Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt					
Date debt was incurred <u>2022</u>		Last 4 digits of account number <u>6848</u>			

Debtor 1 Robert H. Sickles Case number (if known)

First Name Middle Name Last Name

2.2 Northfield Bank Describe the property that secures the claim: \$4,920,780.00 \$10,000,000.00 \$0.00

Creditor's Name

Debtor is sole owner of AHS Realty LLC, which owns the real property located at 1 Harrison Ave., Little Silver, NJ 100%

1515 Irving Street
Rahway, NJ 07065

Number, Street, City, State & Zip Code

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Nature of lien. Check all that apply.

☐ An agreement you made (such as mortgage or secured car loan)

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

☒ Other (including a right to offset)

Security interest

Who owes the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

2.3 Northfield Bank Describe the property that secures the claim: Unknown \$1,800,000.00 Unknown

Creditor's Name

4 Healthcliff Road Rumson, NJ 07760
Monmouth County

1515 Irving Street
Rahway, NJ 07065

Number, Street, City, State & Zip Code

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Nature of lien. Check all that apply.

☐ An agreement you made (such as mortgage or secured car loan)

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

☒ Other (including a right to offset)

Security interest

Who owes the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$5,452,780.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$5,452,780.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

[]

Name, Number, Street, City, State & Zip Code

David H. Stein, Esq.

90 Woodbridge Center Dr.

Suite 900, Box 10

Woodbridge, NJ 07095-0958

On which line in Part 1 did you enter the creditor? 2.2

Last 4 digits of account number

Fill in this information to identify your case:

Debtor 1	Robert H. Sickles		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number			
(if known)			

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

☐ No. Go to Part 2.

☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

			Total claim	Priority amount	Nonpriority amount
2.1	State of New Jersey Priority Creditor's Name Sales & Use Tax CN 999 Trenton, NJ 08625-0999 Number Street City State Zip Code	Last 4 digits of account number	\$766,784.00	\$766,784.00	\$0.00
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify			
		Business Sales & Use Tax			

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Debtor 1 Robert H. Sickles

Case number (if known) _____

4.1	Alexander Hay Greenhouses, Inc. Nonpriority Creditor's Name 75 Oakwood Ave North Haledon, NJ 07508 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? <u>2023</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Personal Guaranty on Business Debt</u>	\$7,345.14
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4.2	American Express Nonpriority Creditor's Name 200 Vesey Street Manhattan, NY 10001 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7000</u> When was the debt incurred? <u>2023</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit card purchases</u>	\$17,859.04
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4.3	Arett Sales Corp. Nonpriority Creditor's Name PO Box 536608 Pittsburgh, PA 15253-5908 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? <u>2023</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Personal Guaranty on Business Debt</u>	\$5,136.11
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Debtor 1 Robert H. Sickles

Case number (if known) _____

4.4	Avion Funding/Reliance Financial Nonpriority Creditor's Name 633 167th Street N. Miami Beach, FL 33162 Number Street City State Zip Code	Last 4 digits of account number _____	\$134,900.00
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another	When was the debt incurred? <u>2023</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	<input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Personal Guaranty on Business Debt</u>	

4.5	Balthazar Bakery Wholesale Nonpriority Creditor's Name 214 South Dean St. Englewood, NJ 07631 Number Street City State Zip Code	Last 4 digits of account number _____	\$1,301.20
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another	When was the debt incurred? <u>2023</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	<input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Personal Guaranty on Business Debt</u>	

4.6	Bank of America Visa Nonpriority Creditor's Name 100 North Tryon St Charlotte, NC 28255 Number Street City State Zip Code	Last 4 digits of account number <u>3090</u>	\$28,800.04
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	When was the debt incurred? <u>2022-2023</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	<input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit card purchases</u>	

Debtor 1 Robert H. Sickles

Case number (if known) _____

4.7

BFG Supply Co LLC

Nonpriority Creditor's Name
14500 Kinsman Road
Burton, OH 44021

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

\$8,857.10

When was the debt incurred? 2023

As of the date you file, the claim is: Check all that apply

☐ Contingent

☒ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Personal Guaranty on Business Debt

4.8

Bimbo Bakeries USA Inc.

Nonpriority Creditor's Name
PO Box 412678
Boston, MA 01904

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

\$5,047.69

When was the debt incurred? 2023

As of the date you file, the claim is: Check all that apply

☐ Contingent

☒ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Personal Guaranty on Business Debt

4.9

C. Rooney Produce Co., Inc.

Nonpriority Creditor's Name
c/o David W. Fassett, Esq.
560 Main St.
Chatham, NJ 07928

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

Unknown

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☒ Contingent

☒ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Business Debt

Debtor 1 Robert H. Sickles

Case number (if known) _____

4.1
0

Catsmo LLC

Nonpriority Creditor's Name
25 Myers Road
Walkill, NY 12589

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

\$4,035.23

When was the debt incurred? 2023

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Personal Guaranty on Business Debt

4.1
1

Celmol Inc. d/b/a Mark Roberts

Nonpriority Creditor's Name
1611 E. Saint Andrew Place
Santa Ana, CA 92705-6000

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

\$3,740.55

When was the debt incurred? 2023

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Personal Guaranty on Business Debt

4.1
2

Core Funding Source LLC

Nonpriority Creditor's Name
8549 Wilshire Blvd
Suite 852
Beverly Hills, CA 90211

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

\$159,893.00

When was the debt incurred? 2023

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Personal Guaranty on Business Debt

Debtor 1 Robert H. Sickles

Case number (if known) _____

4.1
3

Credit Line Capital Group

Nonpriority Creditor's Name

124 Grove Avenue

Suite 194

Cedarhurst, NY 11516

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number _____

\$55,453.00

When was the debt incurred? 2023

As of the date you file, the claim is: Check all that apply

☐ Contingent

☒ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Personal Guaranty on Business Debt

4.1
4

Delaware Valley Wholesale Florist Inc.

Nonpriority Creditor's Name

520 Mantua Blvd. N.

Sewell, NJ 08080

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number _____

\$43,453.66

When was the debt incurred? 2023

As of the date you file, the claim is: Check all that apply

☐ Contingent

☒ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Personal Guaranty on Business Debt

4.1
5

Eminent Funding LLC

Nonpriority Creditor's Name

369 Lexington Avenue

2nd and 3rd Floors

New York, NY 10017

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number _____

\$134,991.00

When was the debt incurred? 2023

As of the date you file, the claim is: Check all that apply

☐ Contingent

☒ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Personal Guaranty on Business Debt

Debtor 1 Robert H. Sickles

Case number (if known) _____

4.1
6

Excellent Meats

Nonpriority Creditor's Name
c/o Carl D. Gensib, Esq.
850 Carolier Lane
North Brunswick, NJ 08902
Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number _____

\$20,807.31

When was the debt incurred? 2023

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☒ Unliquidated
☒ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Personal Guaranty on Business Debt

4.1
7

Excellent Meats LLC

Nonpriority Creditor's Name
1889 Route 9, Bldg 9, Unit 30
Toms River, NJ 08755
Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number _____

\$497.64

When was the debt incurred? 2023

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☒ Unliquidated
☒ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Personal Guaranty on Business Debt

4.1
8

Farmlind Produce, LLC

Nonpriority Creditor's Name
c/o David W. Fassett, Esq.
560 Main St.
Chatham, NJ 07928
Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number _____

Unknown

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

- ☒ Contingent
☒ Unliquidated
☒ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Business Debt

Debtor 1 Robert H. Sickles

Case number (if known) _____

4.1
9

Food Merchants LLC

Last 4 digits of account number _____

\$8,704.76

Nonpriority Creditor's Name
6823 Fort Hamilton Pkwy
Suite 123
Brooklyn, NY 11219

When was the debt incurred? 2023-2024

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt

☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☒ No

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

☒ Other. Specify Personal Guaranty on Business Debt

4.2
0

Four Seasons Produce, Inc.

Last 4 digits of account number _____

Unknown

Nonpriority Creditor's Name
c/o David W. Fassett, Esq.
560 Main St.
Chatham, NJ 07928

When was the debt incurred? _____

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt

☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☒ No

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

☒ Other. Specify Business Debt

4.2
1

Gourmet Foods International

Last 4 digits of account number _____

\$18,668.79

Nonpriority Creditor's Name
38 Fairfield Place
West Caldwell, NJ 07006

When was the debt incurred? 2023

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt

☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☒ No

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

☒ Other. Specify Personal Guaranty on Business Debt

Debtor 1 Robert H. Sickles

Case number (if known) _____

4.2
2

Kapitus LLC/Kapitus Servicing, Inc.

Nonpriority Creditor's Name

2500 Wilson Blvd., Suite 350
Arlington, VA 22201

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number _____

\$109,010.00

When was the debt incurred? 2024

As of the date you file, the claim is: Check all that apply

☐ Contingent

☒ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Personal Guaranty on Business Debt

4.2
3

Kube-Pak

Nonpriority Creditor's Name

194 Route 526
Allentown, NJ 08501

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number _____

\$2,752.78

When was the debt incurred? 2023-2024

As of the date you file, the claim is: Check all that apply

☐ Contingent

☒ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Personal Guaranty on Business Debt

4.2
4

Meged Funding Group Corp.

Nonpriority Creditor's Name

1 Princeton Ave.
Brick, NJ 08724

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number _____

\$51,806.25

When was the debt incurred? 2023

As of the date you file, the claim is: Check all that apply

☐ Contingent

☒ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Personal Guaranty on Business Debt

Debtor 1 Robert H. Sickles

Case number (if known) _____

4.2
5Performance Food Group, Inc.

Last 4 digits of account number _____

\$100,489.75

Nonpriority Creditor's Name
d/b/a Performance Foodservice Metro
NY
1 Center Drive
CN-6070
Elizabeth, NJ 07207

When was the debt incurred? 2024

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Contingent☐ Debtor 2 only☒ Unliquidated☐ Debtor 1 and Debtor 2 only☒ Disputed☒ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☒ No☐ Debts to pension or profit-sharing plans, and other similar debts☐ Yes☒ Other. Specify Personal Guaranty on Business Debt4.2
6S. Katzman Produce

Last 4 digits of account number _____

\$13,238.50

Nonpriority Creditor's Name
153-57 Row A
Hunts Point Produce Market
Bronx, NY 10474

When was the debt incurred? _____

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Contingent☐ Debtor 2 only☒ Unliquidated☐ Debtor 1 and Debtor 2 only☒ Disputed☒ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☒ No☐ Debts to pension or profit-sharing plans, and other similar debts☐ Yes☒ Other. Specify Personal Guaranty on Business Debt4.2
7Union Funding Group LLC

Last 4 digits of account number _____

\$72,515.00

Nonpriority Creditor's Name
1835 E. Hallandale Beach Blvd, #278
Hallandale, FL 33009

When was the debt incurred? 9/2023

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Contingent☐ Debtor 2 only☒ Unliquidated☐ Debtor 1 and Debtor 2 only☒ Disputed☒ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☒ No☐ Debts to pension or profit-sharing plans, and other similar debts☐ Yes☒ Other. Specify Personal Guaranty on Business Debt

Debtor 1 Robert H. Sickles

Case number (if known) _____

4.2
8

US Foods, Inc.

Last 4 digits of account number _____

\$116,302.86

Nonpriority Creditor's Name
9399 West Higgins Road
Suite 600
Rosemont, IL 60018

When was the debt incurred? 2023

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt

☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☒ No

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

☒ Other. Specify Personal Guaranty on Business Debt

4.2
9

Wellen Capital LLC

Last 4 digits of account number _____

\$106,175.00

Nonpriority Creditor's Name
872 S. Milwaukee Ave., #289
Libertyville, IL 60048

When was the debt incurred? 2023

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt

☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☒ No

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

☒ Other. Specify Personal Guaranty on Business Debt

4.3
0

Zinch Funding

Last 4 digits of account number _____

\$57,621.00

Nonpriority Creditor's Name
17011 Beach Blvd., Suite 1140
Huntington Beach, CA 92647

When was the debt incurred? 2023

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

- ☐ Contingent
☒ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt

☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☒ No

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

☒ Other. Specify Personal Guaranty on Business Debt

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Robert H. Sickles

Case number (if known) _____

Name and Address
 American Express
 Customer Service
 P.O. Box 981535
 El Paso, TX 79998-1535

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
 Avi Faskowitz, Esq.
 The Faskowitz law Firm PLLC
 61-43 186 Street, Suite 207
 Fresh Meadows, NY 11365

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.15 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
 Basile W. Coale, Jr.
 Director, Eastern Region PACA Div.
 USDA Agricultural Marketing Service
 100 Riverside Pkwy, Suite 101
 Fredericksburg, VA 22406

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
 Brian Shaw, Esq.
 Cozen O'Connor
 123 N. Wacker Dr., Suite 1800
 Chicago, IL 60606

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.28 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
 Isaac H. Greengield, Esq.
 Law Offices of Isaac H. Greenfiled
 PLLC
 2 Executive Blvd, Suite 305
 Suffern, NY 10901

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.24 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
 Josh A. Kesselman, Esq.
 Liberman and Klestzick LLP
 1915 Hollywood Blvd, Suite 200
 Hollywood, FL 33020

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.27 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
 Mitchell J. Malzberg, Esq.
 Law Offices of Mitchell J. Malzberg
 LLC
 6 E. Main Street, Suite 7
 Clinton, NJ 08809

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.25 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
 Mitchell Malzberg, Esq.
 Law Offices of Mitchell J. Malzberg
 LLC
 PO Box 5122
 6 East Main St., Suite 7
 Clinton, NJ 08809

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
 NJ Division of Taxation
 Freehold Invest-B
 2 Paragon Way, Suite 1100
 Freehold, NJ 07728

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.1 of (Check one):☒ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Debtor 1 Robert H. Sickles

Case number (if known) _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1	6a. Domestic support obligations	6a.	\$ <u>0.00</u>
	6b. Taxes and certain other debts you owe the government	6b.	\$ <u>766,784.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ <u>0.00</u>
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$ <u>766,784.00</u>
Total claims from Part 2	6f. Student loans	6f.	\$ <u>0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ <u>0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ <u>1,289,402.40</u>
	6j. Total Nonpriority. Add lines 6f through 6i.	6j.	\$ <u>1,289,402.40</u>

Fill in this information to identify your case:

Debtor 1	Robert H. Sickles		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?**
☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone).** See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code		State what the contract or lease is for
2.1	Eatontown Audi 95 NJ-36 Eatontown, NJ 07724	lease for August A5, \$1,100 per month, expires February 2027

Fill in this information to identify your case:

Debtor 1	Robert H. Sickles		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number			
(if known)			

☐ Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☐ No

☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☒ No. Go to line 3.

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1 AHS Realty LLC
1 Harrison Ave.
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.18
☐ Schedule G _____
Farlind Produce, LLC

3.2 Sickles Management, Inc.
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.15
☐ Schedule G _____
Eminent Funding LLC

3.3 Sickles Management, Inc.
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.18
☐ Schedule G _____
Farlind Produce, LLC

Debtor 1 Robert H. Sickles

Case number (if known)

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.4 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☒ Schedule D, line 2.1
☐ Schedule E/F, line _____
☐ Schedule G _____
Bluestone Commercial Capital LLC

3.5 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.27
☐ Schedule G _____
Union Funding Group LLC

3.6 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.30
☐ Schedule G _____
Zinch Funding

3.7 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.25
☐ Schedule G _____
Performance Food Group, Inc.

3.8 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.24
☐ Schedule G _____
Meged Funding Group Corp.

3.9 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.28
☐ Schedule G _____
US Foods, Inc.

3.10 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.1
☐ Schedule G _____
Alexander Hay Greenhouses, Inc.

3.11 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.4
☐ Schedule G _____
Avion Funding/Reliance Financial

Debtor 1 Robert H. Sickles

Case number (if known)

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.12 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.12
☐ Schedule G _____
Core Funding Source LLC

3.13 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.13
☐ Schedule G _____
Credit Line Capital Group

3.14 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.15
☐ Schedule G _____
Eminent Funding LLC

3.15 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.16
☐ Schedule G _____
Excellent Meats

3.16 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.22
☐ Schedule G _____
Kapitus LLC/Kapitus Servicing, Inc.

3.17 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.3
☐ Schedule G _____
Arett Sales Corp.

3.18 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.11
☐ Schedule G _____
Celmol Inc. d/b/a Mark Roberts

3.19 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.14
☐ Schedule G _____
Delaware Valley Wholesale Florist Inc.

Debtor 1 Robert H. Sickles

Case number (if known)

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.20 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.19
☐ Schedule G _____
Food Merchants LLC

3.21 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.23
☐ Schedule G _____
Kube-Pak

3.22 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.26
☐ Schedule G _____
S. Katzman Produce

3.23 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 2.1
☐ Schedule G _____
State of New Jersey

3.24 Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

☐ Schedule D, line _____
☒ Schedule E/F, line 4.18
☐ Schedule G _____
Farmlind Produce, LLC

3.25 Sickles Provisions LLC
200 Monmouth Street
Red Bank, NJ 07701

☐ Schedule D, line _____
☒ Schedule E/F, line 4.5
☐ Schedule G _____
Balthazar Bakery Wholesale

3.26 Sickles Provisions LLC
200 Monmouth Street
Red Bank, NJ 07701

☐ Schedule D, line _____
☒ Schedule E/F, line 4.8
☐ Schedule G _____
Bimbo Bakeries USA Inc.

3.27 Sickles Provisions LLC
200 Monmouth Street
Red Bank, NJ 07701

☐ Schedule D, line _____
☒ Schedule E/F, line 4.10
☐ Schedule G _____
Catsmo LLC

Debtor 1 Robert H. Sickles

Case number (if known)

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.28 Sickles Provisions LLC
200 Monmouth Street
Red Bank, NJ 07701

☐ Schedule D, line _____
☒ Schedule E/F, line 4.17
☐ Schedule G _____
Excellent Meats LLC

3.29 Sickles Provisions LLC
200 Monmouth Street
Red Bank, NJ 07701

☐ Schedule D, line _____
☒ Schedule E/F, line 4.21
☐ Schedule G _____
Gourmet Foods International

3.30 Sickles Provisions LLC
200 Monmouth Street
Red Bank, NJ 07701

☐ Schedule D, line _____
☒ Schedule E/F, line 4.15
☐ Schedule G _____
Eminent Funding LLC

3.31 Sickles Provisions LLC
200 Monmouth Street
Red Bank, NJ 07701

☐ Schedule D, line _____
☒ Schedule E/F, line 4.18
☐ Schedule G _____
Farmlind Produce, LLC

3.32 TST Beverages LLC
200 Monmouth Road
Suite 175
Red Bank, NJ 07701

☐ Schedule D, line _____
☒ Schedule E/F, line 4.15
☐ Schedule G _____
Eminent Funding LLC

Fill in this information to identify your case:

Debtor 1 Robert H. Sickles

Debtor 2
(Spouse, if filing) _____

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number
(If known) _____

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. **Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there?

Debtor 1

- ☐ Employed
- ☒ Not employed

Debtor 2 or non-filing spouse

- ☐ Employed
- ☒ Not employed

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ 0.00	\$ 0.00
3. Estimate and list monthly overtime pay.	3. +\$ 0.00	+\$ 0.00
4. Calculate gross income. Add line 2 + line 3.	4. \$ 0.00	\$ 0.00

Debtor 1 Robert H. Sickles

Case number (if known) _____

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 0.00	\$ 0.00
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 0.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: _____	5h.+ \$ 0.00	+ \$ 0.00
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 0.00	\$ 0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ 0.00
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 3,837.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: _____	8h.+ \$ 0.00	+ \$ 0.00
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 3,837.00	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 3,837.00 + \$ 0.00 = \$ 3,837.00	
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____		
	11. +\$ 0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies		12. \$ 3,837.00
		Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1 Robert H. Sickles

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☒ No. Go to line 2.

☐ Yes. Does Debtor 2 live in a separate household?

☐ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

2. Do you have dependents? ☒ No

Do not list Debtor 1 and Debtor 2.

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not state the dependents names.

- ☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 0.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 1,541.66

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 1,000.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 Robert H. Sickles

Case number (if known) _____

6. Utilities:								
6a. Electricity, heat, natural gas	6a. \$	1,500.00						
6b. Water, sewer, garbage collection	6b. \$	64.00						
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	0.00						
6d. Other. Specify: _____	6d. \$	0.00						
7. Food and housekeeping supplies	7. \$	1,500.00						
8. Childcare and children's education costs	8. \$	0.00						
9. Clothing, laundry, and dry cleaning	9. \$	250.00						
10. Personal care products and services	10. \$	600.00						
11. Medical and dental expenses	11. \$	300.00						
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	300.00						
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00						
14. Charitable contributions and religious donations	14. \$	0.00						
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.								
15a. Life insurance	15a. \$	0.00						
15b. Health insurance	15b. \$	200.00						
15c. Vehicle insurance	15c. \$	0.00						
15d. Other insurance. Specify: _____	15d. \$	0.00						
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____								
16. \$		0.00						
17. Installment or lease payments:								
17a. Car payments for Vehicle 1	17a. \$	1,100.00						
17b. Car payments for Vehicle 2	17b. \$	0.00						
17c. Other. Specify: _____	17c. \$	0.00						
17d. Other. Specify: _____	17d. \$	0.00						
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).								
18. \$		0.00						
19. Other payments you make to support others who do not live with you.								
19. \$		0.00						
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.								
20a. Mortgages on other property	20a. \$	0.00						
20b. Real estate taxes	20b. \$	0.00						
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00						
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00						
20e. Homeowner's association or condominium dues	20e. \$	0.00						
21. Other: Specify: _____								
21. +\$		0.00						
22. Calculate your monthly expenses								
22a. Add lines 4 through 21.	<table border="1"> <tr> <td>\$</td> <td>8,455.66</td> </tr> <tr> <td>\$</td> <td></td> </tr> <tr> <td>\$</td> <td>8,455.66</td> </tr> </table>		\$	8,455.66	\$		\$	8,455.66
\$			8,455.66					
\$								
\$	8,455.66							
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2								
22c. Add line 22a and 22b. The result is your monthly expenses.								
23. Calculate your monthly net income.								
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,837.00						
23b. Copy your monthly expenses from line 22c above.	23b. -\$	8,455.66						
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .								
23c. \$		-4,618.66						

24. Do you expect an increase or decrease in your expenses within the year after you file this form?
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here: _____

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☐ No☐ Yes. Name of person

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Robert H. Sickles

Robert H. Sickles
Signature of Debtor 1

Date May 9, 2024

X

Signature of Debtor 2

Date

Debtor 1 Robert H. Sickles

Case number (if known) _____

	Debtor 1		Debtor 2
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.
For last calendar year: (January 1 to December 31, 2023)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$0.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For the calendar year before that: (January 1 to December 31, 2022)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$0.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☒ No
☐ Yes. Fill in the details.

Debtor 1		Debtor 2	
Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☒ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more?

- ☒ No. Go to line 7.
☐ Yes List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

- ☐ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☐ No. Go to line 7.
☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...

Debtor 1 Robert H. Sickles

Case number (if known) _____

7. **Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ No☐ Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

8. **Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

List all such matters, including payments on debts guaranteed or cosigned by an insider.

☒ No☐ Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
----------------------------	------------------	-------------------	----------------------	--

Part 4: Identify Legal Actions, Repossessions, and Foreclosures9. **Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☐ No☒ Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
Performance Food Group, Inc. v. Sickles Market LLC, et al. MON-L-1134-24	Civil	Superior Court of NJ Law Div., Special Civil part Monmouth County PO Box 1251 Freehold, NJ 07728	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Meged Funding Group Corp. v. Sickles Market LLC, et al. 508863/2024	Civil	Supreme Court of New York Kings County 360 Adams St., #4 Brooklyn, NY 11201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
US Foods, Inc. v. Sickles Market LLC, et al. 2024L003575	Civil	State of Illinois Circuit Court, Cook County, Law Division 50 West Washington St., Room 2600 Richard J. Daley Center Chicago, IL 60602	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Eminent Funding LLC v. Sickles Market Provisions LLC, Sickles Management LLC, TST Beverages LLC, Robert H Sickles 511004/2024	Civil	Supreme Court of New York Kings County 360 Adams St., #4 Brooklyn, NY 11201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Avion Funding v. Sickles Market LLC, Robert Sickles, et al. 2024114-F	Arbitration	Arbitration Services, Inc. 7600 Jericho Turnpike Suite 402 Woodbury, NY 11797	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor 1 Robert H. Sickles

Case number (if known) _____

Case title Case number	Nature of the case	Court or agency	Status of the case
Food Merchants LLC v. Sickles Market LLC, Robert Sickles, et al. MON-DC-004694-24	Civil	Superior Court of NJ Law Div., Special Civil part Monmouth County PO Box 1251 Freehold, NJ 07728	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Farmlind Produce LLC, et al. v. Sickles Market, LLC, et al. 24-3746(RK)(RLS)	Civil	United States District Court District of New Jersey 402 E. State Street Trenton, NJ 08608	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Webfunder LLC d/b/a Union Funding Group LLC v. Sickles Market LLC, Robert H. Sickles, et al. CACE-24-005709	Civil	Circuit Court, 17th Judicial Circuit 3550 Hollywood Blvd Hollywood, FL 33021	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

TRO

10. **Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**
Check all that apply and fill in the details below.

- ☒ No. Go to line 11.
☐ Yes. Fill in the information below.

Creditor Name and Address	Describe the Property Explain what happened	Date	Value of the property
---------------------------	--	------	-----------------------

11. **Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

- ☒ No
☐ Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
---------------------------	---------------------------------------	-----------------------	--------

12. **Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

- ☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. **Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**

- ☒ No
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address:	Describe the gifts	Dates you gave the gifts	Value
---	--------------------	--------------------------	-------

14. **Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?**

- ☒ No
☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
--	-------------------------------	-----------------------	-------

Debtor 1 Robert H. Sickles

Case number (if known) _____

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost
--	---	-------------------	------------------------

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No
☒ Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
GENOVA BURNS LLC 110 Allen Road Suite 304 Basking Ridge, NJ 07920 dstolz@genovaburns.com	Attorney Fees and filing fees, The initial \$10,000.00 was paid by Debtor's family members, and \$25,000.00 from partial tax refund received.	4/30/2024	\$35,000.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
--------------------------------	---	-----------------------------------	-------------------

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
---	---	--	------------------------

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No
☐ Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
---------------	---	------------------------

Debtor 1 Robert H. Sickles

Case number (if known)

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?
Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

☐ No

☐ Yes. Fill in the details.

Name of Financial Institution and
Address (Number, Street, City, State and ZIP
Code)

Last 4 digits of
account number

Type of account or
instrument

Date account was
closed, sold,
moved, or
transferred

Last balance
before closing or
transfer

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☐ No

☐ Yes. Fill in the details.

Name of Financial Institution
Address (Number, Street, City, State and ZIP Code)

Who else had access to it?
Address (Number, Street, City,
State and ZIP Code)

Describe the contents

Do you still
have it?

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

☐ No

☐ Yes. Fill in the details.

Name of Storage Facility
Address (Number, Street, City, State and ZIP Code)

Who else has or had access
to it?
Address (Number, Street, City,
State and ZIP Code)

Describe the contents

Do you still
have it?

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

☐ No

☐ Yes. Fill in the details.

Owner's Name
Address (Number, Street, City, State and ZIP Code)

Where is the property?
(Number, Street, City, State and ZIP
Code)

Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

☐ No

☐ Yes. Fill in the details.

Name of site
Address (Number, Street, City, State and ZIP Code)

Governmental unit
Address (Number, Street, City, State and
ZIP Code)

Environmental law, if you
know it

Date of notice

Debtor 1 Robert H. Sickles

Case number (if known)

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
--	---	-----------------------------------	----------------

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
---------------------------	---	--------------------	--------------------

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☒ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☒ An officer, director, or managing executive of a corporation
☐ An owner of at least 5% of the voting or equity securities of a corporation

☐ No. None of the above applies. Go to Part 12.

☒ Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
Sickles Market LLC 1 Harrison Ave Little Silver, NJ 07739	Retail Grocery & Garden Center Thahisha Martinez	EIN: 22-2238077 From-To 3/11/97-3/11/24
Sickles Market Provisions LLC 200 Monmouth St. Suite 100 Red Bank, NJ 07701	Retail Grocery Thahisha Martinez	EIN: 82-2780918 From-To 6/28/17-2/16/24
TST Beverages LLC 200 Monmouth Street Suite 175 Red Bank, NJ 07701	Wine & Other Beverage Retail Sales Thahisha Martinez	EIN: 82-2016952 From-To 7/3/17-present
Sickles Management Inc. 1 Harrison Avenue Little Silver, NJ 07739	Retail management of stores Thahisha Martinez	EIN: 83-2463807 From-To 11/14/18-present
AHS Realty LLC 1 Harrison Ave. Little Silver, NJ 07739	Real Estate Property Management Thahisha Martinez	EIN: From-To

Debtor 1 Robert H. Sickles

Case number *(if known)*

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☒ No

☐ Yes. Fill in the details below.

Name

Address

(Number, Street, City, State and ZIP Code)

Date Issued

Debtor 1 Robert H. Sickles

Case number (if known) _____

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Robert H. Sickles

Robert H. Sickles
Signature of Debtor 1

Signature of Debtor 2

Date May 9, 2024

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No
☐ Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1 Robert H. Sickles

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: District of New Jersey

Case number _____
(if known)

☐ Check if this is an amended filing

Official Form 122B

Chapter 11 Statement of Your Current Monthly Income

12/21

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11 (other than Subchapter V). If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

☐ Not married. Fill out Column A, lines 2-11.

☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

☒ Married and your spouse is NOT filing with you. Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2								
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 0.00	\$								
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 0.00	\$								
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ 0.00	\$								
5. Net income from operating a business, profession, or farm	<table border="1"> <thead> <tr> <th>Debtor 1</th> <th>Debtor 2</th> </tr> </thead> <tbody> <tr> <td>Gross receipts (before all deductions)</td> <td>\$ 0.00</td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td>-\$ 0.00</td> </tr> <tr> <td>Net monthly income from a business, profession, or farm</td> <td>\$ 0.00</td> </tr> </tbody> </table>	Debtor 1	Debtor 2	Gross receipts (before all deductions)	\$ 0.00	Ordinary and necessary operating expenses	-\$ 0.00	Net monthly income from a business, profession, or farm	\$ 0.00	Copy here -> \$ 0.00
Debtor 1	Debtor 2									
Gross receipts (before all deductions)	\$ 0.00									
Ordinary and necessary operating expenses	-\$ 0.00									
Net monthly income from a business, profession, or farm	\$ 0.00									
6. Net income from rental and other real property	<table border="1"> <thead> <tr> <th>Debtor 1</th> <th>Debtor 2</th> </tr> </thead> <tbody> <tr> <td>Gross receipts (before all deductions)</td> <td>\$ 0.00</td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td>-\$ 0.00</td> </tr> <tr> <td>Net monthly income from rental or other real property</td> <td>\$ 0.00</td> </tr> </tbody> </table>	Debtor 1	Debtor 2	Gross receipts (before all deductions)	\$ 0.00	Ordinary and necessary operating expenses	-\$ 0.00	Net monthly income from rental or other real property	\$ 0.00	Copy here -> \$ 0.00
Debtor 1	Debtor 2									
Gross receipts (before all deductions)	\$ 0.00									
Ordinary and necessary operating expenses	-\$ 0.00									
Net monthly income from rental or other real property	\$ 0.00									

Debtor 1 Robert H. Sickles

Case number (if known) _____

Column A
Debtor 1

Column B
Debtor 2

7. **Interest, dividends, and royalties**

\$ 0.00

\$ _____

8. **Unemployment compensation**

\$ 0.00

\$ _____

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you _____ \$ 0.00

For your spouse _____ \$ _____

9. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$ 0.00

\$ _____

10. **Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

\$ _____

\$ _____

\$ 0.00

\$ _____

Total amounts from separate pages, if any.

+ \$ 0.00

\$ _____

11. **Calculate your total current monthly income.**

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

\$ 0.00

+ \$ _____

= \$ 0.00

Debtor 1 Robert H. Sickles

Case number (if known) _____

Part 2: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Robert H. Sickles
Robert H. Sickles
Signature of Debtor 1

Date May 9, 2024
MM / DD / YYYY

Debtor 1 Robert H. Sickles

Case number (if known) _____

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2023 to 04/30/2024.

Non-CMI - Social Security Act Income

Source of Income: Social Security

Income by Month:

6 Months Ago:	<u>11/2023</u>	<u>\$0.00</u>
5 Months Ago:	<u>12/2023</u>	<u>\$0.00</u>
4 Months Ago:	<u>01/2024</u>	<u>\$0.00</u>
3 Months Ago:	<u>02/2024</u>	<u>\$0.00</u>
2 Months Ago:	<u>03/2024</u>	<u>\$0.00</u>
Last Month:	<u>04/2024</u>	<u>\$3,837.00</u>
Average per month:		<u>\$639.50</u>

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,
and

Your debts are primarily consumer debts.
Consumer debts are defined in 11 U.S.C.
§ 101(8) as “incurred by an individual
primarily for a personal, family, or
household purpose.”

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under
one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan
for family farmers or
fishermen

Chapter 13 - Voluntary repayment plan
for individuals with regular
income

**You should have an attorney review your
decision to file for bankruptcy and the choice of
chapter.**

Chapter 7: Liquidation

\$245	filing fee
\$78	administrative fee
+	\$15 trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form—the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$571	administrative fee
	\$1,738	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:
<http://www.uscourts.gov/forms/bankruptcy-forms>

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:
<http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses>.

In Alabama and North Carolina, go to:
<http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court
District of New Jersey**

In re Robert H. Sickles

Debtor(s)

Case No.

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	<u>45,000.00</u>
Prior to the filing of this statement I have received	\$	<u>35,000.00</u>
Balance Due	\$	<u>10,000.00</u>

2. \$ 1,738.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

☐ Debtor ☒ Other (specify): The initial \$10,000.00 was paid by Debtor's family members, and \$25,000.00 from partial tax refund received.

4. The source of compensation to be paid to me is:

☐ Debtor ☒ Other (specify): Balance of \$10,000.00 to be paid by balance of tax refund to be received.

5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

May 9, 2024

Date

/s/ Daniel M. Stolz

Daniel M. Stolz

Signature of Attorney

GENOVA BURNS LLC

110 Allen Road

Suite 304

Basking Ridge, NJ 07920

(973) 467-2700 Fax: (973) 467-8126

dstolz@genovaburns.com

Name of law firm

**United States Bankruptcy Court
District of New Jersey**

In re Robert H. Sickles Case No. _____
Debtor(s) Chapter 11

VERIFICATION OF CREDITOR MATRIX

The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date: May 9, 2024 /s/ Robert H. Sickles
Robert H. Sickles
Signature of Debtor

AHS Realty LLC
1 Harrison Ave.
Little Silver, NJ 07739

Alexander Hay Greenhouses, Inc.
75 Oakwood Ave
North Haledon, NJ 07508

American Express
200 Vesey Street
Manhattan, NY 10001

American Express
Customer Service
P.O. Box 981535
El Paso, TX 79998-1535

Arett Sales Corp.
PO Box 536608
Pittsburgh, PA 15253-5908

Avi Faskowitz, Esq.
The Faskowitz law Firm PLLC
61-43 186 Street, Suite 207
Fresh Meadows, NY 11365

Avion Funding/Reliance Financial
633 167th Street
N. Miami Beach, FL 33162

Balthazar Bakery Wholesale
214 South Dean St.
Englewood, NJ 07631

Bank of America Visa
100 North Tryon St
Charlotte, NC 28255

Basile W. Coale, Jr.
Director, Eastern Region PACA Div.
USDA Agricultural Marketing Service
100 Riverside Pkwy, Suite 101
Fredericksburg, VA 22406

BFG Supply Co LLC
14500 Kinsman Road
Burton, OH 44021

Bimbo Bakeries USA Inc.
PO Box 412678
Boston, MA 01904

Bluestone Commercial Capital LLC
41 Grove Street
Haddonfield, NJ 08033

Brian Shaw, Esq.
Cozen O'Connor
123 N. Wacker Dr., Suite 1800
Chicago, IL 60606

C. Rooney Produce Co., Inc.
c/o David W. Fassett, Esq.
560 Main St.
Chatham, NJ 07928

Catsmo LLC
25 Myers Road
Wallkill, NY 12589

Celmol Inc. d/b/a Mark Roberts
1611 E. Saint Andrew Place
Santa Ana, CA 92705-6000

Core Funding Source LLC
8549 Wilshire Blvd
Suite 852
Beverly Hills, CA 90211

Credit Line Capital Group
124 Grove Avenue
Suite 194
Cedarhurst, NY 11516

David H. Stein, Esq.
90 Woodbridge Center Dr.
Suite 900, Box 10
Woodbridge, NJ 07095-0958

Delaware Valley Wholesale Florist Inc.
520 Mantua Blvd. N.
Sewell, NJ 08080

Eatontown Audi
95 NJ-36
Eatontown, NJ 07724

Eminent Funding LLC
369 Lexington Avenue
2nd and 3rd Floors
New York, NY 10017

Excellent Meats
c/o Carl D. Gensib, Esq.
850 Carolier Lane
North Brunswick, NJ 08902

Excellent Meats LLC
1889 Route 9, Bldg 9, Unit 30
Toms River, NJ 08755

Farmlind Produce, LLC
c/o David W. Fassett, Esq.
560 Main St.
Chatham, NJ 07928

Food Merchants LLC
6823 Fort Hamilton Pkwy
Suite 123
Brooklyn, NY 11219

Four Seasons Produce, Inc.
c/o David W. Fassett, Esq.
560 Main St.
Chatham, NJ 07928

Gourmet Foods International
38 Fairfield Place
West Caldwell, NJ 07006

Isaac H. Greengield, Esq.
Law Offices of Isaac H. Greenfield PLLC
2 Executive Blvd, Suite 305
Suffern, NY 10901

Josh A. Kesselman, Esq.
Lieberman and Klestzick LLP
1915 Hollywood Blvd, Suite 200
Hollywood, FL 33020

Kapitus LLC/Kapitus Servicing, Inc.
2500 Wilson Blvd., Suite 350
Arlington, VA 22201

Kube-Pak
194 Route 526
Allentown, NJ 08501

Meged Funding Group Corp.
1 Princeton Ave.
Brick, NJ 08724

Mitchell J. Malzberg, Esq.
Law Offices of Mitchell J. Malzberg LLC
6 E. Main Street, Suite 7
Clinton, NJ 08809

Mitchell Malzberg, Esq.
Law Offices of Mitchell J. Malzberg LLC
PO Box 5122
6 East Main St., Suite 7
Clinton, NJ 08809

NJ Division of Taxation
Freehold Invest-B
2 Paragon Way, Suite 1100
Freehold, NJ 07728

Northfield Bank
1515 Irving Street
Rahway, NJ 07065

Performance Food Group, Inc.
d/b/a Performance Foodservice Metro NY
1 Center Drive
CN-6070
Elizabeth, NJ 07207

S. Katzman Produce
153-57 Row A
Hunts Point Produce Market
Bronx, NY 10474

Sickles Management, Inc.
1 Harrison Ave
Little Silver, NJ 07739

Sickles Market LLC
1 Harrison Ave
Little Silver, NJ 07739

Sickles Provisions LLC
200 Monmouth Street
Red Bank, NJ 07701

State of New Jersey
Sales & Use Tax
CN 999
Trenton, NJ 08625-0999

TST Beverages LLC
200 Monmouth Road
Suite 175
Red Bank, NJ 07701

Union Funding Group LLC
1835 E. Hallandale Beach Blvd, #278
Hallandale, FL 33009

US Foods, Inc.
9399 West Higgins Road
Suite 600
Rosemont, IL 60018

Wellen Capital LLC
872 S. Milwaukee Ave., #289
Libertyville, IL 60048

Zinch Funding
17011 Beach Blvd., Suite 1140
Huntington Beach, CA 92647